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CONFIRMATION NO. 1552

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
10/602,727	06/25/2003 RULE	435	1645	PF596P1N	
APPLICANTS Craig A. Rosen, Laytonsville, MD; Michael W. Laird, Germantown, MD; Reiner L. Gentz, Belo Horizonte-Mg, BRAZIL;					
** CONTINUING DATA ***** This appln claims benefit of 60/391,162 06/26/2002 and claims benefit of 60/468,651 05/08/2003 and claims benefit of 60/406,339 08/28/2002 and claims benefit of 60/417,305 10/10/2002 and claims benefit of 60/426,360 11/15/2002 and claims benefit of 60/434,807 12/20/2002 and claims benefit of 60/438,004 01/06/2003 and claims benefit of 60/443,858 01/31/2003 and claims benefit of 60/443,781 01/31/2003 and claims benefit of 60/454,613 03/17/2003					
** FOREIGN APPLICATIONS *****					
** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /PATRICIA ANN DUFFY Acknowledged _____ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY MD	SHEETS DRAWINGS 7	TOTAL CLAIMS 96	INDEPENDENT CLAIMS 6
ADDRESS HUMAN GENOME SCIENCES INC. INTELLECTUAL PROPERTY DEPT. 14200 SHADY GROVE ROAD ROCKVILLE, MD 20850 UNITED STATES					
TITLE Antibodies against protective antigen					
FILING FEE RECEIVED 2500	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		